

74655-19

5/12/2014

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UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

WASHINGTON, DC 20460

OFFICE OF CHEMICAL SAFETY
AND POLLUTION PREVENTION

Kate Ingram
Hercules Incorporated, A wholly owned sub of Ashland Inc.
500 Hercules Road
Wilmington, DE 19808

MAY 12 2014

Subject: Spectrum XD9400
EPA Reg. No. 74655-19
Application Date: April 10, 2014
Receipt Date: April 14, 2014

Dear Ms. Ingram:

This acknowledges receipt of your notification, submitted under the provision of PR Notice 98-10, FIFRA section 3(c)9.

Proposed Notification:

- To correct typographical error in feed rate
- Remove advisory information
- Change emergency information telephone number

General Comments:

Based on a review of the material submitted, the following comment applies:

The notification application is acceptable and a copy has been inserted in your file for future reference.

Should you have any questions or comments concerning this letter, please contact me at Henson.Wanda@epa.gov or call (703) 308-6345.

Sincerely,

A handwritten signature in black ink that reads "Wanda Y. Henson".

Wanda Y. Henson
Environmental Protection Specialist
Regulatory Management Branch II
Antimicrobials Division (7510P)

Please read instructions on reverse before completing form.

Form Approved. OMB No. 2070-0060

Print Form



United States
Environmental Protection Agency
Washington, DC 20460

Registration
 Amendment
 Other

OPP Identifier Number

Application for Pesticide - Section I

1. Company/Product Number 74655-19	2. EPA Product Manager Demson Fuller	3. Proposed Classification <input checked="" type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) Spectrum XD9400	PM# 32	
5. Name and Address of Applicant (Include ZIP Code) Hercules Incorporated, A wholly owned sub of Ashland Inc 500 Hercules Rd., Wilmington, DE 19808 <input type="checkbox"/> Check if this is a new address	6. Expedited Review. In accordance with FIFRA Section 3(c)(3) (b)(i), my product is similar or identical in composition and labeling to: EPA Reg. No. _____ Product Name _____	

Section - II

<input type="checkbox"/> Amendment - Explain below.	<input type="checkbox"/> Final printed labels in response to Agency letter dated _____
<input type="checkbox"/> Resubmission in response to Agency letter dated _____	<input type="checkbox"/> "Me Too" Application.
<input checked="" type="checkbox"/> Notification - Explain below.	<input type="checkbox"/> Other - Explain below.

Explanation: Use additional page(s) if necessary. (For section I and Section II.)

Notification per PR Notice 98-10 to correct typographical error in feed rate on product label and to make administrative changes. See cover letter for additional information.

Section - III

1. Material This Product Will Be Packaged In:				2. Type of Container	
Child-Resistant Packaging <input type="checkbox"/> Yes* <input type="checkbox"/> No	Unit Packaging <input type="checkbox"/> Yes <input type="checkbox"/> No	Water Soluble Packaging <input type="checkbox"/> Yes <input type="checkbox"/> No	Metal <input type="checkbox"/>		Plastic <input type="checkbox"/>
* Certification must be submitted		If "Yes" Unit Packaging wgt. No. per container	If "Yes" Package wgt. No. per container	Glass <input type="checkbox"/>	
				Paper <input type="checkbox"/>	
				Other (Specify) _____	
3. Location of Net Contents Information <input type="checkbox"/> Label <input type="checkbox"/> Container		4. Size(s) Retail Container		5. Location of Label Directions <input type="checkbox"/> On Label <input type="checkbox"/> On Labeling accompanying product	
6. Manner in Which Label is Affixed to Product		<input type="checkbox"/> Lithograph <input type="checkbox"/> Paper glued <input type="checkbox"/> Stenciled		<input type="checkbox"/> Other _____	

Section - IV

1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)		
Name Kate Ingram	Title Sen Prod Reg Specialist	Telephone No. (Include Area Code) (904) 256-0311
Certification I certify that the statements I have made on this form and all attachments thereto are true, accurate and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.		6. Date Application Received (Stamped)
2. Signature 	3. Title Sen Prod Reg Specialist	
4. Typed Name Kate Ingram	5. Date April 10, 2014	

